Signature

11-26-01

PTO/SB/21 (08-00) Lease type a plus sign (+) inside this box ---> Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Onder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number TRANSMITTAL Filing Date **FORM** First Named Inventor Hayduke, John A. (to be used for all correspondence after initial filing) Group Art Unit **Examiner Name** Total Number of Pages in This Submission Attorney Docket Number 2902-3002-001 ENCLOSURES (check all that apply) Assignment Papers After Allowance Communication to Fee Transmittal Form (for an Application) Group Appeal Communication to Board of Fee Attached Drawing(s) Appeals and Interferences Appeal Communication to Group Amendment / Response Licensing-related Papers (Appeal Notice, Brief, Reply Brief) Petition Routing Slip (PTO/SB/69) After Final Proprietary Information and Accompanying Petition Petition to Convert to a Affidavits/declaration(s) Status Letter Provisional Application Power of Attorney, Revocation Other Enclosure(s) Extension of Time Request Change of Correspondence Address (please identify below): Terminal Disclaimer Return postcard, check in the amount of \$496, Assignment Express Abandonment Request Request for Refund Cover Sheet, 18 copies of U.S. Patents, Express Mailing Label Information Disclosure Statement CD, Number of CD(s) No. EL 790 555 380 US Certified Copy of Priority Remarks Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm REISING, ETHINGTON, BARNES, KISSELLE, LEARMAN & McCULLOCH, P.C. Individual name Signature Date CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 00 Typed or printed name Kevin S. MacKenzie

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date

November 19, 2001

FEE TRANSMITTAL	Complete if Known					
PET INANSMITTAL	Application Number	To Be Assigned				
o` jor FY 2002	Filing Date	To Be Assigned				
NOV 1 9 2001	First Named Inventor	Hayduke, John A.				
Patent lees are subject to annual revision.	Examiner Name	To Be Assigned				
TRADE MANAGEMENT TRADE TRADE	Group / Art Unit	To Be Assigned				
TOTAL AMOUNT OF PAYMENT (\$) 496	Attorney Docket No.	2902-3002-001				

METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)						
The Commissioner is hereby authorized to charge											
_	.cia	indicated fees and credit any over payments to:			3. ADDITIONAL FEES Large Entity		Small Entity				
Acco	Deposit Account Number 50-0852		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid			
				105	130	205	65	Surcharge - late filing fee or oath			
Account Reising, Ethington				127	50	227	25	Surcharge - late provisional filing fee or cover sheet.			
					139	130	139	130	Non-English specification		
☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17					147	2,520	147	2,520	For filing a request for reexamination		
Applicant claims small entity status.						112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
See 37 CFR 1.27 2. Payment Enclosed:						113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
\boxtimes	Check	☐ Cr	edit card	I ☐ Money ☐	Other	115	110	215	55	Extension for reply within first month	
Order FEE CALCULATION					116	400	216	200	Extension for reply within second month		
1. B	ASIC FIL	INC EE		ALGOLATION		117	920	217	460	Extension for reply within third month	
Large	Entity :	Smali	Entity			118	1,440	218	720	Extension for reply within fourth month	
Fee Code		Fee Code	Fee (\$)	Fee Description	Fee Paid	128	1,960	228	980	Extension for reply within fifth month	
101		201	375	Utility filing fee	375	119	320	219	160	Notice of Appeal	
106	-	206	165	Design filing fee	3/3	120	320	220	160	Filing a brief in support of an appeal	
107		207					280	221	140	Request for oral hearing	
108		208	370	Reissue filing fee	Plant filling fee 138 1,510 138 1,510 Petition to institute a public use proceeding		Petition to institute a public use proceeding				
114	160 2	214	80	Provisional filling fee		140	110	240	55	Petition to revive – unavoidable	
· ————				141	1,280	241	640	Petition to revive – unintentional			
SUBTOTAL (1) (\$) 375					142	1,280	242	640	Utility issue fee (or reissue)		
2. EXTR	A CLAIN	1 FFFS				143	460	243	230	Design issue fee	
				Extra Fee from	Fee	144	620	244	310	Plant issue fee	
otal Claim			[Claims below	Paid	122	130	122	130	Petitions to the Commissioner	
ndependent		-20	ı.	9 X 9	= 81	123	50	123	50	Petitions related to provisional applications	
Claims Aultiple	3	-3	"" = [0 × 0	= 0	126	180	126	180	Submission of Information Disclosure Stmt	
Dependent Large	Entity	C-mall	Fuelt	х	= 0	581	40	581	40	Recording each patent assignment per property (times number of	40
Fee Code	Fee	Fee	Entity Fee	Fee Description		146	740	246	370	properties) Filing a submission after final rejection	
103	(\$) 18	Code 203	(\$) 9	Claims in excess of 20		149	740	249	370	(37 CFR § 1.129(a))	
102	84	202	42	Independent claims in e	xcess of 3	140	740	243	310	For each additional invention to be examined (37 CFR § 1.129(b))	
104	280	204	140	Multiple dependent clain		179	740	279	370 F	Request for Continued Examination (RCE)	
109	84	** Deignes independent at the		169	900	169		Request for expedited examination			
110 18 210 9 ** Reissue claims in excess of 20 and		of a design application Other fee (specify)									
						Otner fe	e (specify	"			
			SU	JBTOTAL (2) (\$) 81		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40					
**or numb	er previou	sly paid, ı	f greater;	For Reissues, see above						(\$) 40	<u> </u>
	*or number previously paid, if greater; For Reissues, see above										

SUBMITTED BY Complete (if applicable)									
Name (Print/Type)	Kevin S. MacKenzie	Registration No. Attorney/Agent)	45,639	Telephone	248-689-3500				
Signature	WARNING Internal			Date	V/ 19/01				